

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	8-31-01
FORMALITY REVIEW	K	1019	09-25-01
RESPONSE FORMALITY REVIEW	H-S	866	01-02-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
□	Allowed	I	Interference
—	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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